Arizona NAS Action Plan

Addressing Maternal Opioid Use Disorder to Prevent and Reduce the Effects of Neonatal Abstinence Syndrome (NAS): Preventing NAS Learning Lab

October 2018

(Final Draft: Approved 1/2/2019)







EXECUTIVE SUMMARY

Since June 15, 2017, there have been more than 2 babies born per day that have suffered with possible drug-related withdrawal symptoms according to the Arizona Department of Health Services (ADHS), Enhanced Surveillance System set up under Emergency Declaration issued by Governor Doug Ducey on June 5, 2017 to reduce opioid deaths in Arizona. ADHS created the enhanced surveillance system to collect real time data on opioid related events that include cases of neonatal abstinence syndrome (NAS) reported by hospitals. Data collected indicate that 901 Arizona babies have been born with possible drug-related withdrawal symptoms since June 15, 2017. Of those, 49% of the mothers of NAS cases were being medically supervised while taking opioids while pregnant and 51% of the mothers were using substances without a prescription and without medical supervision. (Source: azhealth.gov/opioid). Reported suspected NAS cases by hospital facility from June 15 – July 31, 2018 (901) indicate that 70% are from Maricopa County, Arizona facilities while the remaining 30% of cases are in outlying counties.

In Arizona, the incidence of Neonatal Abstinence Syndrome (NAS) among newborns has increased by 31% from 2015 (n=470) to 2016 (n=615). In 2016 there were 1,910 substance exposed newborns identified in Arizona through hospital discharge data, resulting in a total of 615 NAS cases (7.48 per 1,000 live births). Based on the number of NAS cases reported, maternal opioid use in 2016 was identified in 7% of 86,228 hospital births. Additionally, the rate of newborns exposed to narcotics increased more than 219%. (Source: ADHS Population Health and Vital Statistics https://pub.azdhs.gov/health-stats/hip/index.php). The state Medicaid System, the Arizona Health Care Cost Containment System (AHCCCS), represented 51% of all Arizona births between 2008 and 2014, but was the payer for 79% of the NAS births. The Arizona Department of Child Safety (DCS) had 3,736 case reports in FY16 and 4,239 case reports in FY17 with tracking characteristics indicating a substance exposed newborn (SEN). These data illustrate a clear health disparity among our most impoverished and vulnerable population and the need to develop sustainable solutions. On June 5, 2017, Arizona Governor Doug Ducey issued his first public health emergency declaration, which called for a statewide effort to reduce opioid deaths in Arizona. An Enhanced Surveillance Advisory following the declaration resulted in the reporting of 1,521 possible opioid deaths, and 10,141 possible opioid overdoses, of which 41% were women as of August 2, 2018.

In January 2018, the Arizona Department of Health Services collaborated with the Arizona Department of Child Safety, the Arizona Health Care Cost Containment System (AHCCCS) and the Arizona Governor's Office of Youth, Faith and Family to submit an application for the National Governors Association (NGA) Learning Lab to address maternal opioid use disorder to prevent and reduce the effects of neonatal abstinence syndrome (NAS). The application was awarded in March 2018 to provide technical assistance on the development of a state action plan that addresses policy and financing strategies for programs to prevent and reduce the effects of opioid-related NAS. The State Team was formed and convened a NAS Planning Meeting which included key stakeholders and community partners on May 30, 2018. The Arizona NAS Action Plan is a 3 year plan that is a culmination of the input provided at that meeting. It is intended to present strategies that will serve as a catalyst to reduce the number of babies born with possible drug-related withdrawal symptoms in Arizona. The Plan is a working draft document that will be modified as strategies are reviewed and progress is recorded.

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Vision Statement

Establish a coordinated approach to increase awareness and improve outcomes for families impacted by opioid use and substance use during pregnancy.

Goals Summary

1. Coordinate across agencies to ensure buy-in and the most effective response.

Key Performance Metrics:

- 1. By October 2019, identify any additional SUD/OUD and MAT service providers by county and neonatal abstinence syndrome (NAS) resources that may be included on the www.substanceabuseaz.gov website.
- 2. Increase the knowledge base of healthcare providers and behavioral health providers regarding screening, diagnosis and treatment of OUD and substance use in pregnant and postpartum women.

Key Performance Metrics:

- 1. By June 2019, develop a series of training modules and/or webinars on SUD/OUD NAS for physicians, nurses, other healthcare providers, SUD treatment and MAT providers, home visitors, and county court judges.
- 2. By June 2019, ensure current and existing media campaigns include raising awareness and reducing stigma around SUD/OUD and women.
- 3. Increase implementation of a family-centered approach at all levels of care to screen women and link them to treatment and support services such as home visiting.

Key Performance Metrics:

- 1. By June 2020, expand/increase temporary transitional housing resources for SUD/OUD pregnant women and women with children and include case management and wrap around services such as job training and transportation.
 - 2. By June 2020, expand the use of Peer Support Specialists at SUD/OUD and MAT treatment sites including on-going training.

	effective res	sponse.	ncies to ensure buy-in a		As of 12/15/21
Action Steps	Timeline/Due	Agency/Point Person(s)	Needed Resources	<u>Notes</u>	In Progress/Complete
1. Identify any additional SUD/OUD/ MAT providers by county that provide services for women of reproductive age including pregnant/postpartum women with children: a. Provide a list of service provider updates and/or stakeholder websites links to the GOYFF for consideration to be added to the Prevention Treatment and Recovery Locator website; a.1. Increase the number of providers certified to prescribe MAT b. Explore adding Neonatal	Date October 2019	Arizona Department of Health Services (ADHS) Arizona Health Care Cost Containment System (AHCCCS) Arizona Department of Child Safety (DCS) Arizona Statewide Task Force on Preventing Prenatal Exposure to Alcohol and Other Drugs (Substance Exposed Newborn Prevention Task Force) BCBSAZ Mobilize AZ Department of Education (DOE) Arizona Alliance for Community Health Centers) (AACHC)	The Governor's Office of Youth, Faith and Family (GOYFF) Treatment Locator is in place and maintained. www.substanceabuseaz.gov AHCCCS developed treatment/bed locator: http://opioidservicelocator.azahccs.gov No cost to put links on stakeholder websites to key websites including: www.azhealth.gov/opioid BCBS AZ funding for MAT Expansion Campaign ASU Center for Applied Behavioral Health Policy	GOYFF Treatment Locator in place. Stakeholders and Task Force to provide input and NAS information to be considered as needed. Information would be shared with the Arizona Substance Abuse Partnership (ASAP) led by the Governor's Office of Youth, Faith and Family (GOYFF) as needed. Action steps have been added to ASAP strategic plan work groups - 618 prescribers completed MAT training to be	COMPLETE: GOYFF has done maintenance on the treatment locator site and it is back up: www.substanceabuseaz.gov GOYFF has provided a link with resources: www.azpreventionresource.com Bed locator is completed as of 2021. Use SAMHSA Site — www.FindTreatment.gov GOYFF — ASAP and Workgroups Meetings are Quarterly. Next one is tentatively planned for September 2020. Substance Abuse Treatment Capacity Reporting is being conducted through a Treatment Availability Survey Initiated by ADHS which may provide additional provider resources. The Treatment Survey is on track and the 4 th Quarter Report will be released soon. GOYFF will coordinate information with survey results and with AHCCCS 'list of providers.

Abstinence Syndrome resources and home visiting services links under the Resources tab of the Prevention Treatment and Recovery Locater website.		Maricopa County Department of Public Health	CDC Overdose Data 2 Action Funds	DATA 2000 waivered; These include OB/GYN's, Nurse Practitioners; AZBlue working on getting a consultant to assist with the waiver process and assist with provider implementation. MAT Waiver Training was provided October 22, 2019 by ASU Center for Applied Behavioral Health Policy *MCDPH	COMPLETE: ADHS added an NAS tab under the Office of Injury Opioid site under www.azdhs.gov http://azhealth.gov/nas Complete – Expanded the number of individuals who can receive Buprenorphine by increasing number of certified providers
2. Explore the development of applying a trauma informed approach for treatment for SUD/OUD and NAS across treatment providers, law	June 2019	Arizona Department of Health Services (ADHS) Arizona Health Care Cost Containment System (AHCCCS)	Agency In-kind staff time. Stakeholder involvement.	Health Policy	AHCCCS has worked with RHBA's to implement a Trauma Informed Care approach. a. Complete
enforcement, aftercare, and sheriff's departments					

 a. Identify and share best practices for treatment of SUD/OUD pregnant women b. Identify and share best practices on treatment of NAS and recommend hospital policies be developed c. Identify and share best practices for law enforcement if available 		Arizona Department of Child Safety (DCS) Arizona Perinatal Trust (APT) Arizona Statewide Task Force on Preventing Prenatal Exposure to Alcohol and Other Drugs (Substance Exposed Newborn Prevention Task Force)	Stakeholders to assist with identifying any best practices for law enforcement with pregnant/parenting women	Banner Hospital System is educating their hospitals regarding the ESC Model. Task Force to reach out to law enforcement to invite them to Task Force meetings.	b. Complete at certain hospitals within Banner System; variation at other hospital systems c. Complete Arizona Angel Initiative (AAI) project provided by GOYFF. Works with police departments in Mesa, Scottsdale and Phoenix.
3. Improve and expand the data collection of NAS cases from diverse/multiple sources to build on data currently available to identify and improve prevention intervention strategies and report cost burden.	January 2020*	Arizona Department of Health Services (ADHS) Arizona Health Care Cost Containment System (AHCCCS) GOYFF ASAP Epi Work Group	Agency In-kind staff time. Involvement of key agencies. ADHS working on revising Opioid site web pages New Birth Defects grant opportunity to add NAS to surveillance	Improved data collection to include more detailed information on women and opioid/substance use will identify and improve prevention intervention strategies and report cost burden.	In Progress: This is improving but needs work. Review of data points and identification of additional variables is being planned. Birth defects surveillance may expand to include NAS. Review of CSTE NAS Standardized Definition. ADHS Epi Staff position and Birth Defects positions will support. GOYFF grant will be used to fund ACJC project to enhance general statewide data profiles

4. Explore the convening of community forums in high risk counties to gain feedback from community stakeholders on the availability of NAS and SUD/OUD prevention education and treatment services for women and infants.	June 2019	ADHS DCS Substance Abuse Coalitions across the state in the counties	Agency In-kind staff time Obtain buy-in from the Local Coalitions.	Discussion was held with Courts regarding the Mapping Project for Maricopa County under QIC grant.	Complete: Opioid Action Plan Planning Meetings held Quarterly OAP and Recommendation Brief updated. Complete: ACEs, Trauma and Substance Exposure Conference completed by DCS September 25, 2019. A planning process was included.
5. Explore the development of consistent contractual language across the state agencies with subcontractors to address services with SUD/OUD pregnant women and infants such as verbal/paper screening of women; a. Identify and meet with state agencies to discuss contract wording and changes	June 2019	Community and State Agencies AHCCCS — Health Plans ADHS — Home Visiting DCS — Correctional Institutions (Jails — Juvenile Services)	Agency In-kind staff time.	ADHS – language re: SBIRT req.in home visiting contracts. AHCCCS doing work on this and has included language in AMPM 410 Maternity Services policy GOYFF – in contracts with ASU for SBIRT through Collegiate Recovery Act	Complete

6.	Explore the possibility of identifying an informal point person/ Program Manager that will inform and coordinate services between State agencies involved in NAS projects and /or program services.	June 2019	ADHS DCS AHCCCS GOYFF	Identify an informal point person that will be available to provide NAS and/or project updates at agency meetings and other groups.	All agencies to provide updates Group is serving in this capacity. ADHS Office of Injury lead for Opioid Projects	Complete: NAS Core Team continuing to meet monthly and provide updates. Coordination with ADHS Office of Injury.
7.	Reach out to DOE, the Universities, and community colleges to identify what strategies are in place to educate and address SUD/OUD in women and children	December 2019*	GOYFF AHCCCS DOE ADHS azhealth.gov/opioid	Funding for University level curriculum provided through State Targeted Response grant funds.	ADHS developed a curriculum for Arizona medical schools, PA and Nurse Practitioner training programs.	Complete: Curriculum is being provided/ implemented at professional schools. GOYFF engaging schools and youth. AHCCCS reached out to the local chapter of ASAM. UA provides CME webinars on SEN and pregnancy monthly.

^{*}Timeline/Due Date extended -Status of Goal 1: Of the seven strategies, six have been completed and one (# 3) is still in progress.

	Goal # 2: Inc behavioral he treatment of	12/15/2021			
Action Steps	<u>Timeline/Due</u> Date	Agency/Point Person(s)	<u>Needed</u> Resources	<u>Notes</u>	<u>Progress</u>
1. Develop a series of training modules and/or webinars as needed on the following: a)overview of Substance Use Disorder (SUD) and Opioid Use Disorder (OUD) and effects on women/infants; b) screening for SUD/OUD of women of reproductive age including motivational interviewing, stigma, ACEs, Trauma Informed Care; c) information on referral resources and home visiting programs; d) offer CME and /or Certificate of Completion to physicians, nurses other medical providers, SUD treatment and MAT providers, home	September 2019*	AHCCCS GOYFF Arizona Department of Economic Security (DES) Courts ADHS	State Targeted Response Carry-Forward funds.	Webinar Training modules for providers being developed by GOYFF, ADHS and DES. The training would be sustained via on-line webinar modules which may include enhancement of existing on-line training or development of new modules. Resource list for referrals needs to be developed and provided as part of training Need provider champions from ACOG/AAP and Arizona Perinatal Trust	Complete: State Targeted Response Carry- Forward funds were utilized to develop Trauma Informed Care training including: 1. Completed -Online course for home visitors 2. Completed - Video Series was developed to provide training for medical providers, ACE's, trauma informed care, MAT and to reduce stigma in caring for women and NAS babies. GOYFF ACE Courses Completed: https://goyff.az.gov/content /state-targeted-response-str Completed: posting of the training and video series has been done on http://azhealth.gov/nas

	visitors, county court judges					
2.	Promote universal screening of women of reproductive age, pregnant women at prenatal and well woman appointments	June 2020	AACHC – Federally Qualified Health Centers (FQHC's) ADHS - Family Planning Services – Title V and Title X Centers for Medicare and Medicaid Services (CMS) Certified Rural Health Clinics	NGA provided information on payment options for screening services.	TMC is doing universal screening of moms. AHCCCS may include recommendations in training. Health Choice Integrated Care (HCIC) is receiving SBIRT funding to do screening and brief intervention training/implementation in Flagstaff at North Country and university health centers; using NIDA quick screen and the Opioid Risk Tool • (consider lab testing in addition to paper/verbal screening)	In Progress: Limited Carry Forward Activities under SHIFT - Promotion of 4P's Plus Screening Tool and training by Dr. Ira Chasnoff. Substance Abuse Service Expansion HRSA Grant administered by AACHC provided SBIRT training. AACHC has reapplied for funding for implementation. Complete: Educational Provider Guidance Flyer on NAS was revised 12/9/2019 which promotes universal screening. Dr. Vicki Copeland provided education on Universal Screening and Evidence Based Tools at the Task Force on 2/3/2020.
3.	Expand the use of screening and brief intervention services to patients	August 2019	AHCCCS	NGA provided information on payment options for screening services.	Explore reimbursement opportunities with AHCCCS and other health plans. Plans should be assessing if there is a concern and doing look-ups on CSPM. AHCCCS Policy AMPM 410 Maternity Services	No Further Action Anticipated (Not feasible at this time re: AHCCCS Plans). This will be discussed at the FQHC level.

4.	Identify and promote best practices for the development of consistent guidelines on screening of pregnant women and infants at birthing hospitals a. Explore diagnosis and coding of SEN infants to ensure all are captured	June 2020*	ADHS APT DCS Substance Exposed Newborn Prevention Task Force TMC	Met with APT to review draft guidelines and document checklists (11/12/2019) Suggested including SUD prenatal screening recommendations (ACOG). Involve ADHS Licensing in any discussion.	Difficult to agree upon the tools to use at the hospital level to screen pregnant women for substance use and babies for NAS due to legal and risk management policies at hospitals. Difficult to implement due to legality at the hospital level. AHCCCS Policy AMPM 410 Maternity Services provides screening through CSPMP.	In Progress. On Hold - Need APT/birth hospitals involved. AHCCCS Plan Physicians are required to check CSPMP for all pregnant members. In Progress: APT revisions to Site Visit Checklist include screening and treatment protocols for infants. Provided suggestions to include prenatal verbal screening of mothers in guidelines/policy document
5.	Utilize information gained from community forums (if convened) to develop a community education plan in high risk counties and provide in person and/or on-line training education on Substance Use Disorders/Opioid Use Disorder and the impact on Women and Infants and families a. Focus on reducing stigma, ACEs,	August 2019*	ADHS DCS Utilize existing local county partners, coalitions and task forces to emphasize the needs of women, children and families Local level providers	Agency In-kind staff time.	Promotion by local ACOG, AZ Academy of Pediatrics, County Partners under Prescription Drug Overdose Prevention for States grant to help push out community education. Convening meeting planned September 25, 2019 – ACEs, Trauma & Substance Exposure – Standards of Care for Infants and Toddlers. Conference will inform future interventions and collaboration. Sessions	revisions (11/12/19). Complete: State Targeted Response Carry- Forward funds utilized 1. Develop/enhance NAS educational materials to use in community education. 2. Complete - Develop an NAS Community Training Kit and other NAS related materials. 3. Convening meeting/conference held September 25, 2019 I served as a community forum.

trauma informed care, alienation, fear of DCS b. Increase community level training for peer support staff to combat stigma on MAT				may be recorded and shared throughout the state.	
6. Explore the possibility of planning future educational events on SEN and NAS to educate providers and communities	June 2020	DCS ADHS AHCCCS SEN Prevention Task Force BCBS FTF and DCS	Continued Funding for future events is needed. QIC Grant funds activities through Courts and supports SHIFT Collaborative Team discussions. BCBS Grant Funds for SENSE Training	State agencies will provide input to events or will share links to webinars addressing related topics. QIC Grant Activities providing subject matter experts and mapping of service areas in Maricopa County to identify gaps and reduce stigma.	Complete/In Progress: State Opioid Response funds or SUPPORT funds have been provided to support on-going convening meetings- SOR Funds to be used for 2020 SEN Convening (DCS); QIC Grant funds other activities. SEN Home Visitor Training with FTF BCBS grant being held as virtual training in June 2020.
7. Provide childbirth and parenting classes to those in SUD/OUD treatment through home visiting or other programs	June 2020	AHCCCS Behavioral Health Providers ADHS DCS Local Service Providers	Funding for classes is needed. Ensure information is consistent throughout all programs.	GOYFF is moving forward with Hushabye Nursery /Tara Sundem using STOR carry-over funds. Tara is doing support groups for moms and care coordination through	Complete: Hushabye Nursery receiving funds to work with pregnant/postpartum women. Home Visiting Program providers provided presentations at the

a. Convene home visiting providers and MAT providers to discuss and incorporate into HV and MAT curriculum	September	GOYFF	State Opioid	CMS. DCS will be providing support. Maricopa County Department of Public Health received CDC Overdose Data to Action grant to impact SEN and develop care coordination with SHIFT Collaborative Raise awareness and	Pregnancy and Birth to 5 Resource Fair at AHCCCS on 11/7/2019. Linkages to home visiting established. DCS provided Home visiting overview at the Arizona Society of Addiction Medicine conference 11/16/19. In Progress/Carry Forward:
media campaigns include raising awareness and reducing the stigma around SUD/OUD and women	2020*	ADHS DCS	Response (SOR) Funding. Request to AHCCCS by ADHS for funds was initiated in August 2019.	address fear and bias, and increase referrals to treatment. AHCCCS to ensure member education materials for Health Plans are appropriate.	1. Youth oriented media campaign launched 2018 2. General population-oriented campaign for stigma reduction. SOR funds were used to create 2 phases of stigma reduction media campaign addressing all populations; Phase 1: What is stigma has been launched. Phase 2 will launch in Spring 2020. ADHS Stigma Reduction Project to AHCCCS for consideration was approved for development. Campaign Hope Heals launched 9/2021. Ongoing.

0	Explore the possibility of	December 2019	ADHS Office of Injury	State Targeted	Review and approval of	Complete:
9.	• • •	December 2019	Substance Exposed	Response Carry-	additional content for	1. Development of NAS Local
	broadening use of Provider		Newborn Prevention Task	Forward funds.	Toolkit by GOYFF Core	Partner Training Tool Kit
	Rx Drug Misuse & Abuse		Force	roiwaru iulius.	Group is needed prior to	educational materials to use
	Toolkit to include:		GOYFF		posting.	in community education are
	a. Additional content		AHCCCS		Provider Toolkit is	complete.
	related to		Mercy Maricopa		circulated in 9 counties;	2. Approval by GOYFF COT
	pregnancy risks and		Integrated Care (MMIC)		determine support to	Workgroup obtained
	SUD/OUD and NAS		integrated care (iviiviie)		increase circulation and	8/13/2019;
	b. Expand use in		UA Center for Rural		push out of NAS	GOYFF has applied for some
	•		Health		materials	NAS carry-over to expand its
	additional counties				Leverage ACOG	programs.
	c. Arizona Health				guidelines to be released	County Partners under the
	Plans Best Practice				in the fall.	Prescription Drug Overdose
	Guidelines				Identify Arizona ACOG	Prevention for States grant
	developed by				and AAP representatives.	may assist with the
	Mercy Maricopa				Connect with MMIC to	distribution of NAS
	Integrated Care				see how they might be	education materials.
	(MMIC) for				able to support this	Complete: Naloxone training
	pregnant women				process (1.5 months).	workbook for CHW's and
					Track ACOG guidelines	training unit by UA Center
	with OUD, possibly				and compare it to	for Rural Health.
	through MCO				existing Mercy toolkit.	
	contracts				ADHS has funded UA to	
					develop a Opioid	
					Overdose Recognition	
					and Naloxone	
					Administration for CHW's	
					draft Workbook	
10	Facilitate	June 2020*	Medical Assisted	Funds from the	Goal is to have peers	Complete:
	trainings/mentorships by		Treatment (MAT)	State Opioid	encourage and support	Follow-up needed with CMS
	OB providers currently		Providers ACOG Arizona	Response (SOR)	additional OBs in	and MIHS regarding
	providing MAT			application are	providing MAT. AACHC	mentorships with providers.
			Representative	planned to be	Opioid Grant and UA	

a. Create a network of support for providers interested/willing to provide MAT b. Increase provider education on prescribing		OB/GYN Providers ADHS Will establish a MAT Data Waiver State Opioid Assistance and Referral Line (OAR) line to provide case management	used for these activities.	Rural Health Office will be conducting training on MAT and SBIRT. ADHS will 1) develop a MAT mentoring program 2) develop academic detailing where current MAT certified physicians will mentor new physicians.	AHCCCS awarded UA College of Medicine funds to increase access to MAT care coordination, treatment and integrated care for pregnant and parenting women; Dr. Maria Manriquez is facilitating the project. AHCCCS has implemented the Oxford House Model.
Suboxone in high risk areas c. Include patient Peer Support Specialists in training				The Oxford House model will remove barriers and include support services for women and children.	Over 17+ houses; 3 for women; more are planned to serve pregnant and parenting women and families. Peer Support training provided by RHBA contracted providers.
11. Promote UA CME on-line course for Managing Opioid Misuse Disorder during Pregnancy and Neonatal Care and coordinate with development of other on-line training developed	August 2019*	ADHS Office of Injury ADHS		County Partners under the Prescription Drug Overdose Prevention for States grant may help push out courses. This is being developed.	Complete: State Targeted Response Carry-Forward funds utilized 1. Develop an e-learning training course on NAS and trauma informed care for home visitors. (also under Goal 2/Action Step 1)

^{*}Timeline/Due Date Extended

Status of Goal 2: Out of 11 Action Steps: Seven Action Steps completed: (1, 5, 6,7, 9, 10, 11); 2 in progress (2,, 8) one Action Step (3) no action; one on hold (4).

	Goal # 3: Increase implementation of a family centered approach at all levels of care to screen women and link them to treatment and support services such as home visiting.			12/15/2021	
Action Steps	<u>Timeline/Due</u> <u>Date</u>	Agency/Point Person(s)	Needed Resources	<u>Notes</u>	<u>Progress</u>
1. Develop Opioid Case Management System at all Health Plans to provide integrated perinatal care case management a. Pair MAT providers with OB/GYN Providers for referrals b. Explore use of universal ROI	June 2020	AHCCCS Behavioral Health Providers MAT Providers OB/GYN Providers	AHCCCS will apply for PPW-PLT Grant SAMHSA – Pima and Pinal Counties	Implementation of AHCCCS Complete Plans will provide linkages to physical and behavioral health services.	No Action to date: Discussion has occurred and more research is needed.
2. Explore and promote the implementation of the Banner Hospital System Family Centered NAS Care Program at most Arizona Banner birth hospitals with a Special	December 2019	Arizona Banner Hospital System	Banner staff United Healthcare Plan Hushabye Nursery Jacob's Hope*	Arizona Banner Hospitals that are on-board and want the program at their facility. ESC has been implemented at: - UMC Banner Tucson	In Progress: New Banner grant award of \$100,000 to Banner Tucson to train and implement the ESC model at other Banner hospitals.

Care Nursery or		- Estrella Banner	UMC Tucson is providing
Neonatal Intensive Care		Hospital -	training and education
Unit		Phoenix	on this model.
Sint Sint		THOCHIA	*Jacob's Hope becomes
		Pending -Banner Del	a licensed Residential
		Webb, Cardon	Pediatric Recovery
		Children's Medical	Center and accepts its
		Center, BUMC	first baby on 11/2019.
		Phoenix	Second baby 1/2020.
		Other Hospitals that	Still operating.
		have implemented ESC	Hushabye becomes a
		or similar model:	licensed Residential
		- Dignity –	Pediatric Recovery
		Chandler RMC	Center in 2020.
		 Dignity – St. 	
		Joe's	
		- Yavapai RMC	
		- Northern AZ	
		HealthCare-Flag	
		staff	
		Peer to Peer Education	
		Model to be developed	
		by UnitedHealthcare	
		Plan and Hushabye	
		Nursery to educate	
		physicians at hospitals	
		re: best practices and	
		standards of care for	In Drograss
		mothers and infants	In Progress
		Banner Nursing Staff	
		provided TA to Estrella	

		2000	August 1		Banner Hospital in February 2020.	
3.	temporary/transitional housing for SUD/OUD pregnant women and postpartum women and their children a. Include wrap around services such as job training, transportation resources	June 2020	AHCCCS GOYFF BCBSAZ	Funding is being provided. Community Partners are involved. BCBSAZ Mobilize Arizona STR/SOR funding will be used for the startup costs for Oxford homes that are specifically for pregnant and parenting women only	Contract with Oxford House is in place; Homes may open by May 2019. Evidenced Based Housing is moving forward as contracts are in place with 3 RHBA's. Up to 56 new homes which can include pregnant women and women with children in some areas. BCBSAZ Mobilize AZ has awarded funding to TMC, Flagstaff Family Shelter Services and Maggie's Place to expand temporary and transitional housing and wraparound services for SUD/OUD for pregnant and postpartum women and children.	Complete: Funds are being utilized to develop/enhance availability of transitional housing for pregnant women and their children. AHCCCS has implemented the Oxford House Model. 17 houses+; 3+ for women; more are planned to serve pregnant and parenting women and families.
4.	Train Peer Support Specialists and expand use of Specialists at SUD/OUD and MAT Treatment sites	June 2020	AHCCCS Behavioral Health Providers	Funding has been provided.	Expansion of training providers and availability of training is being rolled out.	Complete: State Targeted Response Carry- Forward funds are being utilized to expand training and availability of Peer Support Specialists.

iı	ncluding on-going					
t	raining					
	a. Provide training workshops statewide especially in targeted rural areas					
h	ncrease behavioral nealth provider vorkforce in rural areas	June 2019	ADHS /Bureau of Women's and Children's Health, Primary Care Office Loan Repayment System	NHSC funding is available for Substance Abuse Counselors; Sites must have SAMHSA Certification.	Certified sites are contacted and must meet requirements of the loan repayment program.	Complete: This option is now available to treatment sites to become certified.
() N E a c c	Expand the DCS SENSE Substance Exposed Newborn Safe Environment) Program and expand collaboration with all nome visiting programs n high risk areas	June 2019	DCS Home Visiting Programs 7 counties not being served; 8 counties being served ADHS – HRPP/NICP and Health Start; other home visiting programs	Funding is needed. In-kind staff time and resources. DCS funding was utilized for development and launch of the new Safe Sleep Campaign in partnership with AAP. DCS is still offering \$2 million to agencies to coordinate and implement SENSE referrals.	Nursing and home visiting services are planned to be provided to NAS babies and their families as needed. AHCCCS will publish updated member handbook to include OAR line, home visiting,	Complete: State Opioid Response funding has expanded SENSE nursing visits and Nursing Consultant staff. State Targeted Response Carry- Forward funds are being utilized to expand ADHS Home Visiting services through NICP and Health Start. In Progress: SENSE training upgrade

			AHCCCS - MCH	BCBS Arizona funds being utilized to develop the training for the SENSE home visitation providers Intensive SENSE training for home visitors will be held in June 2020 through the FTF BCBS Grant. SHIFT Collaborative and MCDPH SEN Task Force meet monthly and started a planning process.	and early childhood resources; resources being shared in health plan newsletters, provider forums and manuals; Resource Fair was held in November 2019 for the Health Plans to learn about home visiting and key resources	Complete/In-Progress: AHCCCS ramping up of SEN educational resources
7.	Develop process for education of MAT providers on importance of home visiting services for pregnant women a. Convene and obtain buy-in from key MAT providers	December 2019	DCS MAT Providers/ Arizona Opioid Treatment Coalition (AOTC) ADHS AACHC and Rural Women's Health Network	Funding is needed. In-kind staff time and resources.	Meeting with AOTC and agency meetings on referral processes, etc. can be avenues for development or coordination on this issue. There is a need to include family planning education and specifically LARC since it is covered under AHCCCS.	Complete. DCS provided education to MAT providers at the ASAM conference on 11/16/2019. Discussing strategies to engage MAT providers and provide education. UA Webinar for Providers on Home Visiting Coordinated Referral System and OAR Line Services—11/19 and 12/19.
8.	Develop training for home visitors on pregnant women and families impacted by opioid use	September 2019	ADHS DCS SWHD AOTC/MAT Providers Nursery providers	State Targeted Response Carry Forward funds. Develop a standardized training and review material quarterly	Contract with Matrix Animation in place.	Complete: E-learning training course on NAS and trauma informed care for home visitors is being developed and offers a Certificate. (Also, under Goal 2, Action Steps 1 & 11)

reproductive age		AHCCCS	Funding is needed.	Need to identify and	No Action to date.
	2019	OB/GYN	In-kind staff time and	work with pain	
utilizing pain		Pain Management providers	resources.	management providers.	AHCCCS/UA have moved
<u> </u>		UA College of Medicine	Funding through AHCCCS	UACOMP/AHCCCS	forward on a provider
-					tele-mentoring program
,				9 9	
· · ·					
& treatment providers					
				•	
Dovolon Infant Caro	Juna 2020**	DCS	Agancy In Kind Staff Time		In Progress
· ·	Julie 2020		Agency in-kind Staff Time		Meetings are being held
, ,				pian has been draited	monthly to develop
' ' ' ' '				The prepatal infant care	strategies
<i>'</i>		ocu. to		•	oti ategies
well-being of infants by					
addressing the					
health/SUD treatment				MCDPH is taking the	
need of infant and				lead with QIC and is	
family/caregiver.				piloting the prenatal	
				form.	
				_	
,					
<i>'</i>				1	
				starting April 6, 2020.	
				NCCACM Drastics 0	
_					
and delivering					
	management with an SUD/OUD to OB/GYN family planning services & treatment providers Develop Infant Care Plans (ICPs) with all SEN parents/caregivers to ensure the safety and well-being of infants by addressing the health/SUD treatment need of infant and family/caregiver. a. Pursuant to PL114-198 (CARA ACT) monitor ICPs to determine whether and how local entities are making referrals	management with an SUD/OUD to OB/GYN family planning services & treatment providers Develop Infant Care Plans (ICPs) with all SEN parents/caregivers to ensure the safety and well-being of infants by addressing the health/SUD treatment need of infant and family/caregiver. a. Pursuant to PL114-198 (CARA ACT) monitor ICPs to determine whether and how local entities are making referrals	management with an SUD/OUD to OB/GYN family planning services & treatment providers Develop Infant Care Plans (ICPs) with all SEN parents/caregivers to ensure the safety and well-being of infants by addressing the health/SUD treatment need of infant and family/caregiver. a. Pursuant to PL114-198 (CARA ACT) monitor ICPs to determine whether and how local entities are making referrals	management with an SUD/OUD to OB/GYN family planning services & treatment providers Develop Infant Care Plans (ICPs) with all SEN parents/caregivers to ensure the safety and well-being of infants by addressing the health/SUD treatment need of infant and family/caregiver. a. Pursuant to PL114-198 (CARA ACT) monitor ICPs to determine whether and how local entities are making referrals PACS Adency In-Kind Staff Time Agency In-Kind Staff Time Adency In-Kind Staff Time Agency In-Kind Staff Time Adency In-Kind Staff Time Agency In-Kind Staff Time Agency In-Kind Staff Time Adency In-Kind Staff Time Aden	management with an SUD/OUD to OB/GYN family planning services & treatment providers & treatment providers Develop Infant Care Plans (ICPs) with all SEN parents/caregivers to ensure the safety and well-being of infants by addressing the health/SUD treatment need of infant and family/caregiver. Devision from the purple of the provider of the purple of the provider of the purple of the purpl

appropriate	Team of 9 members will
services to	participate in the
infant/family	Practice and Policy
/caregiver	Academy Planning
/caregiver	Process - August 2020.
	On HOLD Due to
	COVID-19. Continued
	remotely 2020-2022.

^{**}This is a new Action Step proposed by DCS to be added to the Plan as a result of the Region 9 Convening Meetings

Status of Goal 3: Completed Six Action Steps (3, 4, 5, 6, 7, 8); Two are in progress (2, 10); Two have No action (1, 9)